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United States Bankruptcy Court for the:

Northern District of Illinois

Case number (If known):

Chapter you are filing under:

Chapter 7

Chapter 11

Chapter 12

Chapter 13

Chapter 13

Chapter 13

Chapter 13

Chapter P. ALSTEADTI CHERK

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

About Debtor 1: About Debtor 1: About Debtor 2 (Spous 1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Bring your picture identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 years Include your married or maiden names. Middle name Middle name First name First name First name Middle name Last name	
1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Bring your picture identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 years Include your married or maiden names. Middle name First name First name Middle name First name Middle name First name Middle name	
Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Bring your picture identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 years Include your married or maiden names. Middle name Middle name First name First name First name Middle name Middle name First name Middle name	e Only in a Joint Case):
Bring your picture identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) Last riame Last riame Last riame Last riame Last riame Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Middle name Middle name First name Middle name Middle name Middle name Middle name Middle name	10.4
2. All other names you have used in the last 8 years Include your married or maiden names. Middle name First name First name First name Middle name First name Middle name Middle name Middle name Middle name	
have used in the last 8 years Include your married or maiden names. Middle name Last name First name Middle name Middle name Middle name Middle name Middle name	
maiden names. Last name Last name First name Middle name Middle name	
First name Middle name Middle name	
Middle name Middle name	
OTROPO ISSUED	
Last name Last name	WARRIED TO THE TOTAL THE T
3. Only the last 4 digits of your Social Security $xxx - xx - 889$	- \
number or federal OR Individual Taxpayer Identification number 9 xx - xx 9 xx - xx	14.18

Case 16-33114 Doc 1 Filed 10/18/16 Entered 10/18/16 09:09:38 Desc Main Document Page 2 of 65 Case number (# known) **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names ☑ I have not used any business names or EINs. and Employer I have not used any business names or EINs. **Identification Numbers** (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name 5. Where you live If Debtor 2 lives at a different address: Number Street Number Street City ZIP Códe County If your mailing address is different from the one If Debtor 2's mailing address is different from above, fill it in here. Note that the court will send yours, fill it in here. Note that the court will send any notices to you at this mailing address. any notices to this mailing address. Number Street Number Street P.O. Box P.O. Box City ZIP Code City ZIP Code State State 6. Why you are choosing Check one: Check one: this district to file for Over the last 180 days before filing this petition, 🗓 with the last 180 days before filing this petition, bankruptcy I have lived in this district longer than in any I have lived in this district longer than in any

- other district.
- ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
- other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1

Docume Volanda/Gutierrez

Case number (if known)
Case number (if known)

P	art 2: Tell the Court Abou	ut Your E	ankru	ptcy Case	····	· · · · · · · · · · · · · · · · · · ·			
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuels Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	are choosing to file under	Chapter 7							
	unco	☐ Chapter 11							
		Cha	pter 12						
		🗖 Cha	pter 13	i					
8.	How you will pay the fee	loca your sub- with I ne App I rec By less pay	I court reself, you mitting a pre-p ed to p lication uest the aw, a ju than 1: the fee	for more details about lou may pay with cash, of your payment on your lorinted address. The state of the sta	how you not ashier's obehalf, you may guired to, or thoose the choose the choose the cashier to hoose the hoose the cashier to hoose the cashier to hoose the hoose t	nay pay. Typical check, or money ur attorney may u choose this of Fee in Installmet request this optivative your fee, at applies to yourse option, you miss option.	eck with the clerk's office in your ally, if you are paying the fee order. If your attorney is pay with a credit card or check official, sign and attach the ents (Official Form 103A). Ition only if you are filing for Chapter 7, and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the with your petition.		
9.	Have you filed for	⊠ No							
	bankruptcy within the last 8 years?	Yes.	District		When	MM / DD / YYYY	Case number		
	-		.						
			DISTRICT	***************************************	When	MM / DD / YYYY	Case number		
			District				Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	No Yes.	Debtor District		When		Relationship to you Case number, if known		
	affiliate?		Debtor				Palationship to you		
							Relationship to you Case number, if known		
11.	Do you rent your residence?	<u>, , , , , , , , , , , , , , , , , , , </u>					and do you want to stay in your		

☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

residence?

No. Go to line 12.

this bankruptcy petition.

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Debtor 1

Volanda/ Butlemer

Case number	(# known)		

12. Are you a sole proprietor 🗹 No. Go to Part 4.							
of any full- or part-time business?	Yes	. Name and location of business					
A sole proprietorship is a							
business you operate as an individual, and is not a separate legal entity such as		Name of business, if any					
a corporation, partnership, or LLC.		Number Street					
If you have more than one sole proprietorship, use a separate sheet and attach it							
to this petition.		City		State	ZIP Code		
		Check the appropriate box to d	escribe your business:				
		Health Care Business (as d	efined in 11 U.S.C. § 1	01(27A))			
		☐ Single Asset Real Estate (a	s defined in 11 U.S.C.	§ 101(51B)))		
		Stockbroker (as defined in	11 U.S.C. § 101(53A))				
		Commodity Broker (as define	ned in 11 U.S.C. § 101(6))			
		None of the above					
Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see	any of the	hese documents do not exist, fol I am not filing under Chapter 11 I am filing under Chapter 11, bu	low the procedure in 11	U.S.C. § 1			
11 II C C & 101/E1D)		the Bankruptcy Code.			ŭ		
11 U.S.C. § 101(51D).			d I am a amall huaineas	debtor acc	ording to the definition in the		
11 0.3.0. § 101(310).	☐ Yes.	I am filing under Chapter 11 and Bankruptcy Code.	u i ain a sinaii busines:		-		
	or Have	Bankruptcy Code.					
Report if You Own 4. Do you own or have any property that poses or is	or Have ☑ No	Bankruptcy Code. Any Hazardous Property o					
A. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	or Have ☑ No	Bankruptcy Code.					
Report if You Own 4. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	or Have ☑ No	Bankruptcy Code. Any Hazardous Property o					
Report if You Own Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	or Have ☑ No	Any Hazardous Property o What is the hazard?	r Any Property Tha	t Needs i			
A. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs	or Have ☑ No	Any Hazardous Property o What is the hazard?	r Any Property Tha	t Needs i	mmediate Attention		

ZIP Code

State

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Debtor 1

Document Outlerrer Middle Name Last Name

Case number (#known)_____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Α	bou	t D	eht	Of	4

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I

counseling agency within the 180 days before filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after!

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-33114 Doc 1 Filed 10/18/16 Entered 10/18/16 09:09:38 Desc Main

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Case number (# known)_

Debtor	1	

	Answer These Que	strons for keporting rurposes						
16	What kind of debts do you have?	16a. Are your debts primarity consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." \[\bigcup_{\text{No. Go to line 16b.}}\]						
		Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
		No. Go to line 16c.						
		Yes. Go to line 17.						
		16c. State the type of debts you ow	e that are not consumer de	bts or business debts				
17.	Are you filing under Chapter 7?	□ No. I am not filing under Chapt	ter 7. Go to line 18.					
	Do you estimate that after any exempt property is	Yes. I am filing under Chapter 7		any exempt property allable to distribute to	is excluded and unsecured creditors?			
	excluded and	₫ No						
	administrative expenses are paid that funds will be	m						
	available for distribution to unsecured creditors?							
18.	How many creditors do you estimate that you	1-49	1 ,000-5,000	□ 25	,001-50,000			
		50-99	5,001-10,000		,001-100,000			
	owe?	100-199	10,001-25,000	☐ Mo	ore than 100,000			
		200-999						
19.	How much do you	2 \$0-\$50,000	\$1,000,001-\$10 million		00,000,001-\$1 billion			
	estimate your assets to be worth?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million \$50,000,001-\$100 million		,000,000,001-\$10 billion 0,000,000,001-\$50 billion			
		\$500,001-\$1 million	\$100,000,001-\$100 m		o,000,000,007-\$50 billion			
20	How much do you	1 \$0-\$50,000	□ \$1,000,001-\$10 million	. ∏ ¢5.	00,000,001-\$1 billion			
20.	estimate your liabilities	\$50,001-\$100,000	\$10,000,001-\$10 million		,000,000,001-\$10 billion			
	to be?	\$100,001-\$500,000	\$50,000,001-\$100 mill	ion 🔲 \$1	0,000,000,001-\$50 billion			
2000		□ \$500,001-\$1 million	\$100,000,001-\$500 m	illion 🚨 Mo	re than \$50 billion			
Pá	rt 7: Sign Below							
Fo	r you	I have examined this petition, and I correct.	declare under penalty of pe	rjury that the informat	ion provided is true and			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the	ie chapter of title 11, United	States Code, specifie	ed in this petition.			
		I understand making a false stateme with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and	i fines up to \$250,000, or im					
		Signature of Debtor 1	utiessez *	Signature of Debtor 2	1 /			
		Signature of Debtor 1 Signature of Debtor 2 Executed on 10 00 20/6 Executed on 1 MM / DD / YYYY						

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Debtor 1 Yolanda Gutlerrez

Case number (# known)_____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date				
Signature of Attorney for Debtor		ММ	1	DD	/ / / / / / /
Printed name					
Firm name					
Number Street					
City	State	ZIPC	ode		
Contact phone	Email address				

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Debtor 1 / Janda/ Gutierrez

Case number (# known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action consequences?	on with long-te	rm financial and legal
□ No □ Yes		
Are you aware that bankruptcy fraud is a serious crime a inaccurate or incomplete, you could be fined or imprison	•	bankruptcy forms are
No Yes		
Did you pay or agree to pay someone who is not an atto \square_{f} No	rney to help yo	ou fill out your bankruptcy forms?
Yes. Name of Person	aration, and Sig	gnature (Official Form 119).
By signing here, I acknowledge that I understand the risi have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I	nat filing a ban	kruptcy case without an
* Walanda Gutiessez *		
Signature of Debtor 1	Signature of De	btor 2
Date 10 00 9016	Date	MM/ DD/YYYY
Contact phone	Contact phone	
Cell phone 773-297-8513	Cell phone	- W.A
Email address / 1 / unda. gutierrez	Email address	

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re: Yolanda Gutierrez

Debtor (s)

Case No.

Chapter

List of Creditors

TD Bank USA/TARGET Cred. ACT # 435237761863 BAL 8,005 P.D.Box 673 Hinneapolis, MN 55440 (868) 755-5856	Capital one Bonk USA N Out # 41060893 15003 Capital one DR RICHMOND.VA Z3238 BAL Z,440
LANG Bryant Retail/SOA 697800006426 450 Wink in Bensalem,PA 19020 BOLSSS	Portfolia Recovery ASS ACCT # 697800006426 BOL 1,515 120 Corporate BLVD STE 1 NOUTFOIL VA 23602 (800722-1413
Firth third Bank 546700240992 1801 1,352. 15050 KingsleyDL Cincinnation 45227	Portfolio Recovery ASS Act 57850 120 corporate BLVD ste 1 NORFOlk VA 23502 Bal 1,203
Comenity Bank/LUBrayant AC+ # 235102741 BAL 555 PO BOX 182789 Columbus, Oh 43218	Portfolio Recovery ASS Act # 504994852446 BAL 2,999 120 corporate BLVD Stel Worfolk, VA 23502
Chase card Act # 42668411 P.O.BOX 15298 Wilmington, DE 19860 (800) 432-3117 BOL 1,632	Discover Bank P.O.Bex 153160 Wilmington DE 19850- \$001347-2683

Document Page 10 of 65 Debtor 1 FiFth third Bank (BM 247) 5050 Kingsley DR MD IMOCZA Cincinnation 45263 (800) 972-3030 ATET Services PD. BOX 181929 Dallas ,TX 75218 (866)718-2011 FIFTH HAND BONK (BAL 808-) CACH, LCC COCADD FL 4340 & Monaco Second Floor DENVEY, CO (877) 304-0146 Key Jewelers (3#183,996) 375 GHENT RD AKron, OH 44333 Diversified Consultants Inc BAC 2837) 10550 Deerwood PK BUYD Ste 708 Socusanville, FL 32256 (800)771-5361 world Finatial Petwork Bank Bal 1,515 CitiBank NA BAL 2,999

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Fill in this information to identify your case:	
Debtor 1 Yolanda Gutierrez First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (If known)	Check if this is an amended filing
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistical In	nformation 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible information. Fill out all of your schedules first; then complete the information on this form. If you are filing ame your original forms, you must fill out a new Summary and check the box at the top of this page.	e for supplying correct nded schedules after you file
Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 9,540
1c. Copy line 63, Total of all property on Schedule A/B	\$ 9,540
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	s
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 35,310
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$
Your total liabilit	ies \$35,310
Part 3: Summarize Your Income and Expenses	., λ
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	<u>s 931</u> 8.4 <u>s 725</u>
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	s 725

De	Document Page 12 of 65	8/16 09:09:38 Desc	C Main
P	art 4: Answer These Questions for Administrative and Statistical Records	S	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
•	No. You have nothing to report on this part of the form. Check this box and submit this to Yes	form to the court with your othe	r schedules.
. 7.	What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by are family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	n individual primarily for a personses. 28 U.S.C. § 159.	nal,
	Your debts are not primarily consumer debts. You have nothing to report on this parthis form to the court with your other schedules.	t of the form. Check this box a	nd submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official	s_931
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:		
		Total claim	
	From Part 4 on Schedule E/F, copy the following:		
	9a. Domestic support obligations (Copy line 6a.)	<u>\$</u>	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	s	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	
	9d. Student loans. (Copy line 6f.)	<u>sO</u>	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$	
-	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	
	9g. Total. Add lines 9a through 9f.	\$	

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	Document Page 13 01 03		
Fill in this information to identify your case and th	is filing:		
V-1 /	C +		
Debtor 1 Yolanda Middle Name	Gotierrez		
Debtor 2	Las(Name		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District o	f Illinois		
Case number		Г	Check if this is an
	West with the second se	•	amended filing
Official Form 106A/B			
Schedule A/B: Propert	1		
Concadie A/D. 1 Toperi	У		12/15
	nore space is needed, attach a separate sheet to the wer every question. Land, or Other Real Estate You Own or Ha	nis form. On the top of a	any additional pages,
Do you own or have any legal or equitable interest.	est in any residence, building, land, or similar proj	perty?	
No. Go to Part 2.			
Yes. Where is the property?	What is the property? Check all that apply.	Participation of Asserts	an ang ang ang ang ang ang ang ang ang a
	Single-family home	Do not deduct secured ci the amount of any secure	
1.1.	Duplex or multi-unit building	Creditors Who Have Clai	
Street address, if available, or other description	☐ Condominium or cooperative	Current value of the	Current value of the
	Manufactured or mobile home	entire property?	portion you own?
	Land	\$	\$
	☐ Investment property	***************************************	
City State ZIP Code	Timeshare	Describe the nature of interest (such as fee	of your ownership
	Other	the entireties, or a lif	
	Who has an interest in the property? Check one		
	Debtor 1 only		
County	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
	At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this in property identification number:	tem, such as local	
If you own or have more than one, list here:			
	What is the property? Check all that apply.	Do not deduct secured cla	ims or exemptions. Put
1.2.	Single-family home	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Street address, if available, or other description	Duplex or multi-unit building	Creditors With Have Claff	на осситей бу гторену.
	Condominium or cooperative	Current value of the	Current value of the
	☐ Manufactured or mobile home ☐ Land	entire property?	portion you own?
	☐ Investment property	\$	\$
	Timeshare	Describe the nature of	f your ownership
City State ZIP Code	Other	interest (such as fee	simple, tenancy by
	Who has an interest in the property? Check one.	the entireties, or a life	estate), if Known.
	Debtor 1 only		
	Debtor 1 only Debtor 2 only		
County	Debtor 1 and Debtor 2 only	Chank if this is an	
	At least one of the debtors and another	Check if this is co	minunity property

Other information you wish to add about this item, such as local

property identification number:

Debtor 1	Case 16-33114 Dod 15 Cast Name Middle Name Last Name	Filed 10/18/16 Entered 10/18/16 0 Document Page 14 of 65 number (#		//ain
	en e	What is the property? Check all that apply.	Do not deduct secured cla the amount of any secure	
1.3.	Street address, if available, or other description	☐ Single-family home ☐ Duplex or multi-unit building	Creditors Who Have Clair	
	oneet accress, il avaisable, di usiel description	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		Land	\$	\$
		Investment property		
	City State ZIP Code	☐ Timeshare ☐ Other	Describe the nature of your owners interest (such as fee simple, tenanc the entireties, or a life estate), if kno	
		Who has an interest in the property? Check one.	*	
		Debtor 1 only		
	County	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this ite property identification number:	em, such as local	
you own 3. Cars,	that someone else drives. If you lease a vehicle vans, trucks, tractors, sport utility vehicles	st in any vehicles, whether they are registered or a e, also report it on <i>Schedule G: Executory Contracts</i> : , motorcycles	n ot? I nclude any vehicles and Unexpired Leases.	
U Ye	es			
3.1.	Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	ms or exemptions. Put claims on Schedule D:
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debiors and another	entire property?	portion you own?
	Other information:		_	
		Check if this is community property (see instructions)	\$	\$
If you	own or have more than one, describe here:			
3.2.	Make:	Who has an interest in the property? Check one.	Do not deduct secured clai	
	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Claim	claims on Schedule D:
	WARRANT ARE	Debtor 2 only	in particular profit in a series of the discontinuous car.	
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the

At least one of the debtors and another

☐ Check if this is community property (see instructions)

Approximate mileage:

Other information:

entire property?

portion you own?

a contract of the contract of			
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Cinet Alarma Alicidia Alarma	Loot Many	9	· · · · · · · · · · · · · · · · · · ·

Part 3: Describe Your Personal and Household Items	
	Current value of the portion you own? Do not deduct secured claims
	or exemptions.
6. Household goods and furnishings	
Examples: Major appliances, furniture, linens, china, kitchenware	
Ves. Describe	s 2,500
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
Two TV's one radio One Old and microward	\$ 1,200
8. Collectibles of value	į
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
☐ Yes. Describe	\$
9. Equipment for sports and hobbies	ı
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
₫ No	
Yes. Describe	\$
10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe	\$
11. Clothes	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	1
Casual Clothes shoes Jackets and coats	<u>s 1,000</u>
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
☐ Yes. Describe	\$
13. Non-farm animals Examples: Dogs, cats, birds, horses	
☑ No	
Yes. Describe	\$
14. Any other personal and household items you did not already list, including any health aids you did not list	
□ No	
☐ Yes. Give specific	\$
information	· 4700

for Part 3. Write that number here

``	,						
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10-17	VERCE COLL - V	(i	ADDUUNIEHI CO	#age to organizate (if known)			
First Name	Middle Name	Last Name					

		-	
Describe	I UUI	r mark-rar	A33663

		any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Cash				
Examples: Money y	ou have in your wallet, in your hon	ne, in a safe deposit box, and on hand when yo	u file your petition	
□ No			,,,	
2 Yes			Cash:	\$
	g, savings, or other financial accou	ents; certificates of deposit; shares in credit unio cultiple accounts with the same institution, list ea		i,
□ No				
☐ Yes		Institution name:		
	17.1. Checking account:	Bank of America		100.00
	17.2. Checking account:			\$
	17,3. Savings account;			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:		<u> </u>	\$
	17.6. Other financial account:		~~~~	\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
	is, or publicly traded stocks ds, investment accounts with broke Institution or issuer name:	erage firms, money market accounts		
Examples: Bond fun	ds, investment accounts with broke Institution or issuer name:	erage firms, money market accounts		. \$
Examples: Bond fun	ds, investment accounts with broke Institution or issuer name:			. \$ \$
Examples: Bond fun	ds, investment accounts with broke			\$ \$ \$
Examples: Bond fun	ds, investment accounts with broke			. \$. \$
Examples: Bond fun No Yes	ds, investment accounts with broken institution or issuer name:			. \$ \$ \$
Examples: Bond fun No Yes	ds, investment accounts with broken Institution or issuer name:			. \$. \$
Examples: Bond fun No Yes Non-publicly trade an LLC, partnershi No Yes. Give specifi	ds, investment accounts with broken institution or issuer name: d stock and interests in incorporate, and joint venture Name of entity:		ding an interest in	\$
Examples: Bond fun No Yes Non-publicly trade an LLC, partnershi	ds, investment accounts with broken institution or issuer name: d stock and interests in incorpore, and joint venture Name of entity:	rated and unincorporated businesses, includ	ding an interest in % of ownership:	\$\$

20			ther negotiable and non-negotiable instruments		
	Non-negotiable instruments	inciude personai ch e <i>nts</i> are those you c	ecks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.		
	No No				
	Yes. Give specific	Issuer name:			
	information about	roddi / spille.		_	
	them			\$	
				\$	
				\$	***************************************
24	Datiroment or pension				
21	Retirement or pension Examples: Interests in If		401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
	☑ No		, , , , , , , , , , , , , , , , , , , ,		
	Yes. List each				
	account separately.	Type of account:	Institution name:		
		401(k) or similar plar	n:	\$	
		Pension plan:		\$	
		IRA:		\$	
		Retirement account:		\$	
		Keogh:		\$	
				*	
		Additional account:		\$	
		Additional account:		\$	
22.	Security deposits and p	prepayments			
			made so that you may continue service or use from a company		
	Examples: Agreements v companies, or others	with landlords, prepa	aid rent, public utilities (electric, gas, water), telecommunications		
	□ No				
	_/		and the officer of the state of		
	Ŭ Yes		nstitution name or individual:		
		Electric:		\$	180.00
		Gas:		\$	60.00
		Heating oil:		\$	
		Security deposit on re	ental unit:	\$	
		Prepaid rent:		\$	94,00
		Telephone:		\$	
		Water:		\$	
		Rented furniture: _		\$	
		Other:		\$	
				Ψ	
23.	Annuities (A contract for	a periodic payment	t of money to you, either for life or for a number of years)		
	☑ No	and the second s			
	☐ Yes	Issuer name and de	escription.		
		right and de	our protes.	\$	
				Ф	· · · · · · · · · · · · · · · · · · ·
				D	·

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☐ Yes. Give specific information.....

Debtor 1 Case 16-33	114 D	001 / Filed 10/18/16 OCT (Focument	Entered 10/18/16 Page 18 Otas Enumber		esc Main
24. Interests in an education IRA 26 U.S.C. §§ 530(b)(1), 529A(No Yes	b), and 529(b)(1). name and description. Separate	•	ests.11 U.S.C. § 521	
					\$
25. Trusts, equitable or future in exercisable for your benefit	terests in p	roperty (other than anything li	sted in line 1), and rights o	r powers	
Yes. Give specific information about them					\$
26. Patents, copyrights, tradema Examples: Internet domain na		secrets, and other intellectual es, proceeds from royalties and		PP (PP PP PP VI) VI (PP VI) VI (PP VI) VII (VII) VII (VII) VII (VIII) VII (VIII) VII (VIII) VIII VIII	
☐ No					
Yes. Give specific information about them					\$
27. Licenses, franchises, and ot Examples: Building permits, ex No Yes. Give specific information about them		intangibles nses, cooperative association ho	ldings, liquor licenses, profes	sional licenses	.
Money or property owed to you		42/41/4/2014/2014/2014			
					Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax/refunds owed to you					
☐ No					
☐ Yes. Give specific informat	ion	29.4.70% м ^{ад} обосов 19.67 в общения был болбоны в населения в населения устанующего поступу _{19.9} году уче _н оду	The PERFORMANCE and and the American Assessments and a substant of a commonly and a substant and a common c	Federal:	œ
about them, including you already filed the r	whether		of the second of		\$
and the tax years	3		Paul Machanini de promote de la compansa de la comp	State: Local:	\$ \$
/	ım alimony,	spousal support, child support, r	naintenance, divorce settlem	ent, property settlem	ent
E No	ſ				
☐ Yes. Give specific informat	ion			Alimony:	¢
			Account to the contract of the	Maintenance:	\$
			oblika i Professor	Support:	\$ \$
			al track man beginning	Divorce settlement:	\$
				Property settlement:	\$
30. Other amounts someone owe Examples: Unpaid wages, disa Social Security ben	bility insurar	nce payments, disability benefits loans you made to someone els	sick pay, vacation pay, wor	•	

	e e e e e e e e e e e e e e e e e e e		
Interests in insurance policies			
-	ance; health savings account (HSA); credit, homeowner's, or renter's insurance	
Yes. Name the insurance company of each policy and list its value.	Company name:	Beneficiary:	Surrender or refund valu
, ,			\$
			\$
			S
Any interest in property that is due yo	tt fram comoano who has died		***************************************
	expect proceeds from a life insurar	nce policy, or are currently entitled to receive	•
Fly at white it		**************************************	
Yes. Give specific information	•		i
Yes. Give specific information		made a demond for neumant	\$
Claims against third parties, whether of Examples: Accidents, employment disputed No	or not you have filed a lawsuit or les, insurance claims, or rights to so	made a demand for payment	\$
Claims against third parties, whether of Examples: Accidents, employment disput	or not you have filed a lawsuit or les, insurance claims, or rights to so	made a demand for payment ue	\$
Claims against third parties, whether of Examples: Accidents, employment disputed No Yes. Describe each claim	or not you have filed a lawsuit or les, insurance claims, or rights to so 	made a demand for payment ue	\$
Claims against third parties, whether of Examples: Accidents, employment disputed No Yes. Describe each claim	or not you have filed a lawsuit or les, insurance claims, or rights to so	made a demand for payment ue	\$\$
Claims against third parties, whether of Examples: Accidents, employment disputed No Yes. Describe each claim	or not you have filed a lawsuit or les, insurance claims, or rights to so	made a demand for payment ue unterclaims of the debtor and rights	\$
Claims against third parties, whether of Examples: Accidents, employment dispured No Yes. Describe each claim	or not you have filed a lawsuit or les, insurance claims, or rights to so	made a demand for payment ue unterclaims of the debtor and rights	\$\$
Claims against third parties, whether of Examples: Accidents, employment disputed No Yes. Describe each claim. Other contingent and unliquidated claims to set off claims No Yes. Describe each claim. Any financial assets you did not alread	or not you have filed a lawsuit or les, insurance claims, or rights to so	made a demand for payment ue unterclaims of the debtor and rights	\$\$ \$\$
Claims against third parties, whether of Examples: Accidents, employment disputed No Yes. Describe each claim. Other contingent and unliquidated claim to set off claims No Yes. Describe each claim. Any financial assets you did not alread No	or not you have filed a lawsuit or les, insurance claims, or rights to so	made a demand for payment ue unterclaims of the debtor and rights	\$\$
Claims against third parties, whether of Examples: Accidents, employment disputed No Yes. Describe each claim. Other contingent and unliquidated claim to set off claims No Yes. Describe each claim. Any financial assets you did not alread No	or not you have filed a lawsuit or les, insurance claims, or rights to so	made a demand for payment ue unterclaims of the debtor and rights	\$\$ \$
Claims against third parties, whether of Examples: Accidents, employment disputed No Yes. Describe each claim	or not you have filed a lawsuit or les, insurance claims, or rights to so me of every nature, including co	made a demand for payment ue unterclaims of the debtor and rights	
Claims against third parties, whether of Examples: Accidents, employment disputed No Yes. Describe each claim. Other contingent and unliquidated claims to set off claims No Yes. Describe each claim. Any financial assets you did not alread	or not you have filed a lawsuit or les, insurance claims, or rights to so me of every nature, including co	made a demand for payment ue unterclaims of the debtor and rights	

Part 5:	Describe Any Business-Related Property You Own or Have an Interest In. List any re	eal estate in Part 1.
37. Do you	own or have any legal or equitable interest in any business-related property?	
☑ No.	Go to Part 6.	
☐ Yes	s. Go to line 38.	
		Current value of the portion you own?
		Do not deduct secured claims or exemptions.
38. Accou r	its receivable or commissions you already earned	
₩ No		
☐ Yes	. Describe	

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No ☐ Yes. Describe.....

2			
\ <i>(</i> !ase 16-331/14	Den 1 (Filed 10/18/16	Entered 10/18/16 09:09:38 Page 20 of 65 number (# known)	Desc Main
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First Name Middle Name	Last Name	. ago =0 0. 00	

40. Machinery, fixtures, equipment, supplies you use in business, and tools of yo	our trade	
₽ No		
Yes. Describe	A September 1997 of the September 1997 of th	
		\$
		d
41. Inventory		
PNo proposition and the proposition of the proposit		
Yes. Describe		\$
42. Interests in partnerships or joint ventures		
☑ No		
Yes. Describe Name of entity:	% of ownership:	
	%	\$
		\$
	%	\$
43. Customer lists, mailing lists, or other compilations		
☐ No		
Yes. Do your lists include personally identifiable information (as defined in	11 U.S.C. § 101(41A))?	
☐ No		
Yes. Describe	CONTROL OF AN ADDRESS OF PROCESSION SEASON S	
		\$
44. Any business-related property you did not already list		
Ø No		
Yes. Give specific information		\$
intotthation		\$
		<u> </u>
	W-1	\$
		\$
		\$
	***************************************	\$
45. Add the dollar value of all of your entries from Part 5, including any entries for	r pages you have attached	. 1
for Part 5. Write that number here		•
Part 6: Describe Any Farm- and Commercial Fishing-Related Propert	ty You Own or Have an Interest in	
If you own or have an interest in farmland, list it in Part 1.	.,	
46. Do you own or have any legal or equitable interest in any farm- or commercial	fishing-related property?	
No. Go to Part 7.		
☐ Yes. Go to line 47.		
		Current value of the
		portion you own?
	1	Do not deduct secured claims
47. Farm animals	•	or exemptions.
Examples: Livestock, poultry, farm-raised fish		
No		
U Yes		
		\$

Debtor 1 Calse 16-33114 Doc 1 Filed 10 Fifst Name Middle Name Last Name	0/18/16 Entered 10/18/16 09:09:38 nent Page 21 of 65se number (# known)	Desc Main
48. Crops—either growing or harvested		
Yes. Give specific	•	\$
49. Farm and fishing equipment, implements, machinery, fixt		
☐ Yes		\$
50. Farm and fishing supplies, chemicals, and feed No		
☐ Yes		\$
51. Any farm- and commercial fishing-related property you di	d not already list	
Yes. Give specific		\$
52. Add the dollar value of all of your entries from Part 6, incl for Part 6. Write that number here		→ \$
53. Do you have other property of any kind you did not alread Examples: Season tickets, country club membership	e an Interest in That You Did Not List Ab	ove
Yes. Give specific information		\$ \$
4. Add the dollar value of all of your entries from Part 7. Write	e that number here	→ \$
Part 8: List the Totals of Each Part of this For	m	
5. Part 1: Total real estate, line 2		> \$
6. Part 2: Total vehicles, line 5	\$	
7. Part 3: Total personal and household items, line 15	s 4,700	
8. Part 4: Total financial assets, line 36	s 4840.00	
9. Part 5: Total business-related property, line 45	\$	
0. Part 6: Total farm- and fishing-related property, line 52	\$:
1. Part 7: Total other property not listed, line 54	+\$	
2 Total parcanal property. Add lines 56 through 61	•	0540

63. Total of all property on Schedule A/B. Add line 55 + line 62.

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Fill in this information to identify your case:			
Debtor 1 Yolanda	Gutier	rez	
First Name Middle Name Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern Distriction Case number	ict of fillnois		Down zwy
(If known)			Check if this is an amended filing
Official Form 106C			
Schedule C: The Prop	perty You	Claim as Exemp	04/16
Be as complete and accurate as possible. If two matures the property you listed on <i>Schedule A/B: Property</i> space is needed, fill out and attach to this page as a your name and case number (if known).	perty (Official Form 106A	VB) as your source, list the property that	you claim as exempt. If more
For each item of property you claim as exempt, specific dollar amount as exempt. Alternatively, of any applicable statutory limit. Some exemption retirement funds—may be unlimited in dollar amount in the exemption to a particular dollar amount would be limited to the applicable statutory amount of the statutory amoun	you may claim the full ons—such as those for nount. However, if you nt and the value of the	fair market value of the property bein health aids, rights to receive certain i claim an exemption of 100% of fair ma	g exempted up to the amount penefits, and tax-exempt trket value under a law that
Part 1: Identify the Property You Claim	n as Exempt		
 Which set of exemptions are you claiming? You are claiming state and federal nonban You are claiming federal exemptions. 11 L For any property you list on Schedule A/B to 	kruptcy exemptions. 11 J.S.C. § 522(b)(2) hat you claim as exemp	U.S.C. § 522(b)(3) pt, fill in the information below.	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	\$	- \$	**************************************
Line from Schedule A/B:	*	100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□s	
Line from		100% of fair market value, up to	
Schedule A/B:		any applicable statutory limit	
Are you claiming a homestead exemption or (Subject to adjustment on 4/01/19 and every 3)		s filed on as after the date of adjustment	
□ No			•
Yes. Did you acquire the property covered No	by the exemption within	1,215 days before you filed this case?	
☐ Yes			

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First Name Middle Name Last Name Page 23 of 65 number (# known)

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief	Schedule A/B		
description:	\$	Q \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:		■ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<u> </u>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line fromSchedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	

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	200dillolle 1 ago 2 1 of 00			
Fill in this information to identify your case	se:			
Valanda	Grationer			
Debtor 1 Y Middle Middle	Name Last Name			
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number(If known)			☐ Check	if this is an
			amend	
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Secur	ed by Pro	perty	12/15
information. If more space is needed, cop	. If two married people are filing together, both are ed by the Additional Page, fill it out, number the entries,	lually responsible and attach it to this	for supplying corrects form. On the top of	t any
additional pages, write your name and car	se number (if known).			
4. Do novemble as been status as a second				
1. Do any creditors have claims secured by	oy your property? m to the court with your other schedules. You have noth	l to	thin forms	
Yes. Fill in all of the information below.		ng eise to report on	inis form.	
3 es. I in ili an or the illiothiduori perow.	•			
Part 1: List All Secured Claims				
		Column A	Colomb D	^
2. List all secured claims. If a creditor has r	nore than one secured claim, list the creditor separately	Amount of claim	Column B Value of collateral	Column C Unsecured
	has a particular claim, list the other creditors in Part 2.	Do not deduct the	that supports this	portion
and the second of the second o	nabetical order according to the creditor's name.	value of collateral.	claim	If any
2.1	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name	A CONTACT AND A			
***		Table and the same		
Number Street		1		
	As of the date you file, the claim is: Check all that apply. Contingent			
	Unliquidated			
City State ZIP Code	D Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt				
Date debt was incurred 2.2	Last 4 digits of account number			Constantintintal page of the state of the st
	Describe the property that secures the claim:	\$	<u> </u>	<u> </u>
Creditor's Name		AAA II JAAA II JAAAA II JAAA II JAAAA II JAAAA II JAAA II JAAAA I		
Number Street				
	As of the date you file, the claim is: Check all that apply.	;		
	Contingent			
City Charles 71D Co. 11	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
	Other (including a right to offset)			
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
A WASA-1944-AND SHEAM CARLES AND				Del Continue de la constante d

Case 16	5-331,14	Dog 1	Filed 10/18/16	Entered 10/18/16 09:0	9:38	Desc Main	
Yola	nda	(DU	+ Decument	Entered 10/18/16 09:0 Page 25 of 65 Case number (# known)			
First Name	Middle Name	Last Ma	2/20	COULD FILL THE CALL AND WILL	·		

Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
Creditor's Name	Describe the property that secures the claim:	\$	_ \$	\$
Number Street		Webpards on comme		
	As of the date you file, the claim is: Check all that apply.	•		
City State 2IP Code	Contingent Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	carloan)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
	Other (including a right to offset)			
 Check if this claim relates to a community debt 	— obtai (matering a right to disset)			
Date debt was incurred	Last 4 digits of account number			
and the selection of th	Describe the property that secures the claim:	S	mentitationalisticon (in consentration or encountry consents)	Production of Consider to Assistance of Constitution of Consti
Creditor's Name			· Y	·
Number Street	-			
Silver Si	As of the date you file, the claim is: Check all that apply.			
	Contingent			
	Unliquidated			
City State ZiP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only				
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
Community debt Date debt was incurred	Last 4 digits of account number			
A WHITE STATE AND A CHARLES AN		en til det staten fra skalle klade på til klade krepter skalle for år for til beste klade klade klade skalle k I skalle skalle for til beste klade for til beste klade for til beste klade klade klade for til beste klade f	والمارات المساوحة والمراح المساوحة والمراح المراح المراح المراحة والمراح والمساوحة والمراحة والمراح وا	et and a standard polyment of a security of a second polyment
Creditor's Name	Describe the property that secures the claim:	•	\$\$	
Number Street	-			
	And the state of t			
	As of the date you file, the claim is: Check all that apply. Contingent			
City State ZIP Code	Unliquidated			
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Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			:
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			:
community debt				:
Date debt was incurred	Last 4 digits of account number			•
Add the dollar value of your entries	in Column A on this page. Write that number here:			i
	and the deliar value totals from all manner			1

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List Others to Be Notified for a Debt That You Already Listed Part 2:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			_
City		State	ZIP Code	-
City		Sale	ZIP Code	On which line in Part 1 did you enter the creditor?
Name		· · · · · · · · · · · · · · · · · · ·		Last 4 digits of account number
				_
Number	Street			,
City		State	ZIP Code	<u>-</u>
		· · · · · · · · · · · · · · · · · · ·		On which line in Part 1 did you enter the creditor?
Name	, ** - *,			Last 4 digits of account number
Number	Street	and the desired of the second		-
City	NA	State	ZIP Code	~ -
				On which line in Part 1 did you enter the creditor?
Name	-, -,			Last 4 digits of account number
Number	Street			<u> </u>
City		State	ZIP Code	<u>-</u>
÷				On which line in Part 1 did you enter the creditor?
Name		LILE WITH BANK TATALAN		Last 4 digits of account number
Number	Street			_
City		State	ZIP Code	- -
		•	•	On which line in Part 1 did you enter the creditor?
Name		Substitution of the substi		Last 4 digits of account number
Number	Street			-
	····		***************************************	-
City		State	ZIP Code	-

	Case 16-33114	Doc 1	Filed 10/18/16	Entered 10/18/16 09	1.09.38	Desc Mai	Π
Fill in this	information to identify yo	our case:		of 65			
Debtor 1	Yolanda		Gutip	rret			
Debtor 2	First Name	Middle Name	Last Name				
	ing) First Name	Middle Name	Last Name	***************************************			
United State	es Bankruptcy Court for the: N	lorthern Distri	ct of Illinois			Па	1 10.11 1
Case number (If known)	er						eck if this is nended filing
Official	Form 106E/F						
Sched	dule E/F: Cred	ditors	Who Have L	Jnsecured Clair	ms		12/15
creditors wineeded, cop any addition	ith partially secured claim	ns that are list it out, number ne and case	sted in <i>Schedule D: Cre</i> or the entries in the box number (if known).	ntracts and Unexpired Leases editors Who Have Claims Secu tes on the left. Attach the Conf	red by Prop	perty. If more s	ace is
			·				
3	creditors have priority un Go to Part 2.	secured clai	ms against you?				
Yes.							
green mages of meaning agreement	医结节 医闭肠性 医电子系统多头线线 电电流电流电压设施	d claime If a	creditor has more than a	one priority unsecured claim, list	the creditor c	congrately for on	oh olaim Far
unsecure	ed claims, fill out the Continexplanation of each type of	uation Page	of Part 1. If more than on	order according to the creditor's ne creditor holds a particular claim	m, list the oth	ner creditors in F	'ari 3.
		country, occurring	e instructions for this fort	n in the instruction booklet.) 🦠			
		own, ood tr	e instructions for this forr	m in the instruction booklet.)	Total clai		
 1 .		, acc 11.	e instructions for this forr	m in the instruction booklet.)	Total clai	im Priority amount	
1		A	e instructions for this forr		Total clai		
1	reditor's Name	A	سمر ast 4 digits of acco	ount number	Total clai		
Priority C	Street	A	_	ount number	Total clai		
Priority C		1	್ಷst 4 digits of acco	ount number	\$		
1 Priority C		1	when was the debt As of the date you for a contingent	ount number	\$		
Priority Number		ZIP Code	when was the debt As of the date you for a contingent Unliquidated	ount number	\$		
Priority Number City Who in	State State Curred the debt? Check one.	ZIP Code	when was the debt As of the date you for a contingent	ount number	\$		
Phone City Who in Debi	Street State State Curred the debt? Check one. stor 1 only stor 2 only	ZIP Code	when was the debt As of the date you for a contingent Unliquidated	incurred?	\$		
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Debtor	1	

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Par	Your PRIORITY Unsecured Claims	— Continuation Page			
Afte	r listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
23	Comenius Bank	Last 4 digits of account number 2741	5555°	\$	\$
	P. O. BOX 182 789 Number Street	When was the debt incurred? $5-1-3$			
	Columbus OH 43218	As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	Contingent Unliquidated			
		☐ Disputed			
	Who incurred the debt? Check one.	The at PRIORITY and a suited of since			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify			
	Is the claim subject to offset?				
	□ No □ Yes				
2.4	Chase Card,	Last 4 digits of account number 8411	s 1,632	\$	\$
	P. O. BOX 15893 Number Street	When was the debt incurred? 7-1-6			
	V	As of the date you file, the claim is: Check all that apply.			
	Willyington DE 1850	Contingent			
	City State ZIP Code	Unliquidated Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government			
	_	Claims for death or personal injury while you were intoxicated			
	LI Check if this claim is for a community debt	P Other. Specify 15 ability			
	te the claim subject to offset?				
	□ No □ Yes			•	
२.इ	AFIN third Bank	Last 4 digits of account number 0992	:1,352	S	\$
(Priority Creditor's Name SOSO Kingley DR Number Street	When was the debt incurred? $11-1-9$			
	Control of the second	As of the date you file, the claim is: Check all that apply.			
ز	Circinnation 45227	☐ Contingent			
,	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were	J		
	☐ Check if this claim is for a community debt	intoxicated PIS ability Other. Specify PIS ability	The second secon		-
	is the claim subject to offset?	_			
	<u>D</u> No				

	W	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	E - 1 1 4 0 /4 0 /4 0 00 00
	Vase 1/0-13/3/L1/4	170¢ 171-147160 1701,18/10	Entered 10/18/16 09:09
Debtor 1	- TUINIANC	Formant	Dago 20 of Se number (Fknown)

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		beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
2.6	Discover -	Last 4 digits of account number _ / v v v	\$ 10,600	\$11,553	\$
	Priority Creditor's Name P. O. BOX 153160 Number Street	When was the debt incurred? 4-8-0	·		
		As of the date you file, the claim is: Check all that apply.		٠	
	Wilmington De 19850 City State ZIP Code	Contingent Unliquidated Disputed			
	Who incurred the debt? Check one. Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated Disability			
	Is the claim subject to offset?				
	No Dayes				
1	Egne Bryant Retail	Last 4 digits of account number & 4.26	, 910	\$	\$
	Priority Creditor's Name 452 WINKS W	When was the debt incurred? $1-22-16$			
	Bensalem PA 19020	As of the date you file, the claim is: Check all that apply.			
	, , , , , , ,	☐ Contingent			
	Gity State ZIP Code	☐ Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other, Specify Other, Specify			
	is the claim subject to offset?	Other, Specify			
	□ No				
ठा	Q Yes	entrick with commence transfer was entricked. For an impact case, while promote section () () in Chair (e i i signeration meste	prome on a section	No Section 1
?	BAY Jewelers	Last 4 digits of account number 67 16	s 3196	\$ \$	5
	375 GHENT RD	When was the debt incurred? 5-22-87			
-	Control of the second	As of the date you file, the claim is: Check all that apply.			
	Fairlawn OH 44333	Contingent Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Li Debtor 2 only				
	Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
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	Is the claim subject to offset?		te a		
	□ No □				

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Par	Your PRIORITY Unsecured Claims	— Continuation Page		
Afte	r listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim Priority amount	Nonpriority amount
2.9	JD BONZ Priority Creditor's Name		.8UOS.	\$
	3701 WAZATA BY	When was the debt incurred? 10-28-03	3	
	Minneapalis mn soul	As of the date you file, the claim is: Check all that apply		
	City State ZIP Code Who incurred the debt? Check one.	Contingent Unliquidated Disputed		
i	Debtor 1 only	Type of PRIORITY unsecured claim:		
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government		
	At least one of the debtors and another	Claims for death or personal injury while you were intoxicated		
	Check if this claim is for a community debt	Other Specify Pisability		
:	Is the claim subject to offset?	9		
	□ No ☑ Yes	and the second s	and the second s	grande sambare a graph
7/0	Capital, one Bank	Last 4 digits of account number 3681	s <u>2</u> 442 s	<u>\$</u>
	P.O. Box. 8515	When was the debt incurred? 10-20-2		
		As of the date you file, the claim is: Check all that apply	ı.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed		
:	Who incurred the debt? Check one. Debtor 1 only	Type of PRIORITY unsecured claim:		
=	Debtor 2 only	Domestic support obligations		
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government		
• •	☐ Check if this claim is for a community debt	Claims for death or personal injury white you were intoxicated DISability		
	is the claim subject to offset?	•		
	□ No □ Yes			
ર,ા(Capital one Bank	Last 4 digits of account number $\frac{0}{5}$	s2 440 s	\$
•	P.O. BOX 85018	When was the debt incurred? (2-1-1		
		As of the date you file, the claim is: Check all that apply.	-	
	Kichmond	Contingent		
	City State ZIP Code	Unliquidated Discovered		

Other. Specify_

Type of PRIORITY unsecured claim:

Taxes and certain other debts you owe the government

Claims for death or personal injury while you were intoxicated

Domestic support obligations

Who incurred the debt? Check one.

Debtor 1 only

LI Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this claim is for a community debt

is the claim subject to offset?

D No

Debtor	1	

Debtor 1 Case 16-33/14 DØC 1 / E	iled 10/18/16 Entered 10/18/16 09:09:38 Desc Main Decument Page 31 of 10/18/16 number (# known)
Part 1: Your PRIORITY Unsecured Claims	— Continuation Page
After listing any entries on this page, number them	AUST AUST AUST AUST AUST AUTO amount amount amount
comenite bank NBryan	Last 4 digits of account number 2741 \$ 9/6 \$ \$
Priority Creditor's Name P-O , BOX 183789 Number Street	When was the debt incurred? 5-/-3
	As of the date you file, the claim is: Check all that apply.
Columbus of 43218	☐ Contingent
City State ZIP Code	☐ Unliquidated
	Disputed Disputed
Who incurred the debt? Check one.	
Debtor 1 only	Type of PRIORITY unsecured claim:
Debtor 2 only	
Debtor 1 and Debtor 2 only	Domestic support obligations
At least one of the debtors and another	Taxes and certain other debts you owe the government
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other. Specify DISABILITY
Is the claim subject to offset?	~

At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were
Check if this claim is for a community debt	intoxicated Disability
is the claim subject to offset?	•
□ No ☑-Yes	
Portfolio Recovery A	Last 4 digits of account number 6426 \$
120 Corporate 8100 Number Street	When was the debt incurred? $7-1-13$
Λ	As of the date you file, the claim is: Check all that apply.
NOCFOIK VA 23507 City State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed
Who incurred the debt? Check one.	
Debtor 1 only	Type of PRIORITY unsecured claim:
Debtor 2 only	D. Domaetic europat abligations

Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other. Specify d Is the claim subject to offset?

☐ No Last 4 digits of account number When was the debt incurred?

As of the date you file, the claim is: Check all that apply. ☐ Contingent

Unliquidated Disputed Who incurred the debt? Check one.

Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only

Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other, Specify

Is the claim subject to offset?

No No

Debtor	1

Part 2:	List All	of	Your	NONPRIORITY	Unsecured	Claim
			- 4-441	* same main i	unscruteu	

3.	Do any creditors have nonpriority unsecured claims against yo No. You have nothing to report in this part. Submit this form to the Yes		
4	List all of your nonpriority unsecured claims in the alphabetical nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, claims fill out the Continuation Page of Part 2.	M. For each claim listed, identify what type of claim it is. Do not	t liet alaima almaad.
4.1]		Total claim
	Nonpriority Creditor's Name	Last 4 digits of account number	\$
		When was the debt incurred?	
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	Time of MOMPHOPITY	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	 Student loans Obligations arising out of a separation agreement or divorce 	
		that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	☐ Yes	Other. Specify	
.2	e de la composição de la c	عقرامتها الدارا مدهلات الرميس معالما ساسان الراغيات المستشار المسترا فالسائد الارداء المعاقف الراسي ولتقر	
	Nonpriority Creditor's Name	The second secon	\$
	Thoughtung Challes a righte	When was the debt incurred?	
	Number Street		
	City State 7IP Code	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Who incurred the debt? Check one.	Unliquidated Disputed	
	Debtor 1 only Debtor 2 only	C Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
	Q Yes	en e	
3		Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	<u> </u>
	Number Street	Annual Control of the	
		As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	·	
	Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated	
	Debtor 1 only Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans Obligations arising out of a senaration agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims	
	□ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Desc Main

Part 2:

List All of Your NONPRIORITY Unsecured Claims

	Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes		
	List all of your nonpriority unsecured claims in the alphabetical on nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, I claims fill out the Continuation Page of Part 2.	 For each claim listed, identify what type of claim it is. Do not 	list claims already
			Total claim
1.1		Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	\$
	Number Street	Tenera mas the deer medited:	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who is assumed the state of Charles	Contingent	
	Who incurred the debt? Check one. Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims	
	No	 Debts to pension or profit-sharing plans, and other similar debts Other. Specify 	
	☐ Yes	G Other. Specify	
			esidente de la companya de la compa
.2			\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
		Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	☐ No ☐ Yes	Other. Specify	
.3			es tempolaritivos estativas estatos prospuestos profiliales introductivos estatos estatos estatos estatos esta
	Nonpriority Creditor's Name	Last 4 digits of account number	\$
	No. priority of editor's Name	When was the debt incurred?	Y.,
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify	

Part 2: List Others to Be Notified for a Debt That You Already	
Use this page only if you have others to be notified about your bankruptcy for a agency is trying to collect from you for a debt you owe to someone else, list the you have more than one creditor for any of the debts that you listed in Part 1, lis be notified for any debts in Part 1, do not fill out or submit this page.	creditor in Part 1, and then list the collection agency here. Similarly, if
FiFth third Bonn	On which line in Part 1 did you enter the creditor?
Name	Last 4 digits of account number
5050 Kingsley DR HW ±mo=26	
Cincinalli OH 45263	
AT&T Services	On which line in Part 1 did you enter the creditor?
Name P.O. Box 181929	Last 4 digits of account number
Number Street	
Dalles TR 752/8 City State ZIP Code	
FiFth third Bonk	On which line in Part 1 did you enter the creditor?
Name	Last 4 digits of account number
Number Street	
CACHILLE	
City State ZIP Code	
1600 Jensolors	On which line in Part 1 did you enter the creditor?
Name George 3	Last 4 digits of account number
Number Street	
AKron OH 44333 City State ZIP Code	
Diversified Consultant Inc	On which line in Part 1 did you enter the creditor?
Name	Last 4 digits of account number
Number Street	
City State ZIP Code	en de la composición
	On which line in Part 1 did you enter the creditor?
Name	Last 4 digits of account number

Number

City

Street

State

ZIP Code

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	. Yolanda	Dogument	Page 35 of 65	
Debtor 1	1. 10 19011010		Case number (# known)	

2 - 100 200 200 200 200 200 200 200 200 200									
Part 2:	1 2-4	Make a see a see	. Pa. 81	4181 B			3.0	A I	
	LIST	Utnors to	no an	TITION TO	r a Dent	IDAT	TALL	AIFCARV	LISTON
				*********					**************************************

City

agency is trying to collect from you for a debt you owe to someone else, list the you have more than one creditor for any of the debts that you listed in Part 1, list be notified for any debts in Part 1, do not fill out or submit this page.	
Postolio Recovery Ass	On which line in Part 1 did you enter the creditor?
Name Lao Corporate BUVD Stel Number Street Nur Folk VA 33502	Last 4 digits of account number Le 426
City State ZIP Code	
Porfotio Recovery Ass	On which line in Part 1 did you enter the creditor?
120 Corporate Bup ste	Last 4 digits of account number 7850
Number Street Norfolk VA 23502	
City State ZIP Code	On which line in Part 1 did you enter the creditor?
Name (COOCHERY ASS	Last 4 digits of account number 2446
Number Street Street BLVD 455	
City State ZIP Code	
DISCUVEC Bank	On which line in Part 1 did you enter the creditor?
P. O. BOX 153160	Last 4 digits of account number
Wilington, 09 19850	
City State ZIP Code	
Model Finantial Notwork	On which line in Part 1 did you enter the creditor?
Name bank	Last 4 digits of account number
Number Street	
City State ZIP Code	
Name Sank	On which line in Part 1 did you enter the creditor? Last 4 digits of account number
Number Street	

State

ZIP Code

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Case number (# known)

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a	
agency is trying to collect from you for a debt you owe to someone else, list the	creditor in Part 1, and then list the collection agency here. Similarly, if
you have more than one creditor for any of the debts that you listed in Part 1, lis	t the additional creditors here. If you do not have additional persons to
be notified for any debts in Part 1, do not fill out or submit this page.	
TO BOOK LOSAL TORGET COOK.	On which line in Part 1 did you enter the creditor?

D Bank USA/ Target cred.	On which line in Part 1 did you enter the creditor?
P.O Box 673 Minneapolis	Last 4 digits of account number $LSG3$
Number Street 1	
City State ZIP Code	
Lane Bryant Retail / SOA	On which line in Part 1 did you enter the creditor?
Name 450 Wink LN Number Street	Last 4 digits of account number 6 4 2 6
Bensalen, PA 19020	
City State ZIP Code	
Efth third Bank	On which line in Part 1 did you enter the creditor? Last 4 digits of account number <u>0</u> <u>7</u> <u>9</u> <u>2</u>
5050 Kings (eg DR) Number Street	Last 4 digits of account number O T COS
Cincinati, on 45227	
City State ZIP Code	
Comenity Bank/LN Bryant	On which line in Part 1 did you enter the creditor?
P. 0 BOX 182789 Number Street	
Columbies, oh 43218	
City State ZIP Code	
Chase Card	On which line in Part 1 did you enter the creditor? Last 4 digits of account number 8 4 1 1
Number Street	
Wilmington, DE 19850	
City State ZIP Code	kkoo - nanganga,waa ngaasa a waga anga gaga oo na a may ay anga o day sa matanga na na anga ag ag ag ana na ma
Lapital One Bank USAN	On which line in Part 1 did you enter the creditor? Last 4 digits of account number $OSGS$
1500 Capital One OR	
Richmond, VA 23238	

City ZIP Code State

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Figure Middle Name Last Name Document Page 37 of 65 uniber (** Middle Name Last Name Document Page 37 of 65 uniber (** Middle Name Doc

Part 3: List Others to Be Notified About a Debt That You Already Listed

example, if a collection agency is trying to collect from you 2, then list the collection agency here. Similarly, if you have	our bankruptcy, for a debt that you already listed in Parts 1 or 2. For I for a debt you owe to someone else, list the original creditor in Parts 1 or more than one creditor for any of the debts that you listed in Parts 1 or 2, list the Ins to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
ID Bank usa Target cred	On which entry in Part 1 or Part 2 did you list the original creditor?
POBOX 173	Line of (Check one): Part 1: Creditors with Priority Ucured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
Mineapolis, MN 55440	Last 4 digits of account number 1863
City State ZIP Code	and the second respective to the second respec
	On which entry in Part 1 or Part 2 did you list the original creditor?
Lane Bryant Retail /SOA	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
980 Wink CV	Claims (a. C.) 2 (a.
City State ZIP Code	Last 4 digits of account number 6 426
	On which entry in Part 1 or Part 2 did you list the original creditor?
Fifth Third Bank	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
5050 Kingseley DR	Claims
Cincinnation 45 227 City State 21P Code	Last 4 digits of account number 0 9 9 2
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Make Card	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
P.O 150 X 15 248	Claims
Wilmington, OF 19850 City State ZIP Code	Last 4 digits of account number $\underline{\mathcal{S}}\underline{\mathcal{Y}}\underline{\mathcal{I}}\underline{\mathcal{I}}$
	On which entry in Part 1 or Part 2 did you list the original creditor?
Capital One Bank USA	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
15000 Capital One Dr	Claims
Richmond, VA 23238 State ZIP Code	Last 4 digits of account number 6593
	On which entry in Part 1 or Part 2 did you list the original creditor?
Portotio Recovery AS	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
120 Corporate BIVA STE	Claims
Nor Folk VA 3502 City State ZIP Code	Last 4 digits of account number 6926
	On which entry in Part 1 or Part 2 did you list the original creditor?
Parkation Recovered Ass	See to the second of the secon
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
120 Corporate BIVE Stel	Claims
Norfolk VA 23502	Last 4 digits of account number 7850

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Rest Name Last Name Document Page 38 of 65

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For

Part 3: List Others to Be Notified About a Debt That You Already Listed

Mortolio Recovery Ass	On which entry in Part 1 or Part 2 did you list the original creditor?
120 Corporate Bluestel	Line of (Check one): Part 1: Creditors with Priority ecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured Claims
NONTOIK, VA 23502	Last 4 digits of account number 2996
,	Last 4 digits of account number 2 7 7 2
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Discover Bank	Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
1-000x 13 31100	Claims
City State ZIP Code	Last 4 digits of account number
iame	On which entry in Part 1 or Part 2 did you list the original creditor?
Fifth Third Bank	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Street VuoCiclas Ox	Part 2: Creditors with Nonpriority Unsecured Claims
3080 FINGSIEG 101	763
City State ZIP Code	Last 4 digits of account number
45 AT&T Service	On which entry in Part 1 or Part 2 did you list the original creditor?
vame	
Vumber Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
Dallas, TX 75 2/8	Claims
	Last 4 digits of account number
State ZIP Code	Last 4 tights of account number
Fifth Third Bank	On which entry in Part 1 or Part 2 did you list the original creditor?
iame Cach ICC 43405 Monaco	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Jumber Street 1390 3 MCNGC	Part 2: Creditors with Nonpriority Unsecured
Denver co	Claims
	Last 4 digits of account number
City State ZIP Code	The state of the s
lame TEWELEVS	On which entry in Part 1 or Part 2 did you list the original creditor?
375 GHENT RD	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Aluccia and U11222	Part 2: Creditors with Nonpriority Unsecured
TINON OF 17003	Claims
ity State ZIP Code	Last 4 digits of account number
Diprosted Consultant Inc	
me Control of the Con	On which entry in Part 1 or Part 2 did you list the original creditor?
0550 Deerwood Ak Blud	Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
Ste. 708 Lansonville	Part 2: Creditors with Nonpriority Unsecured Claims
F/ 32256	Cidina
ity State ZIP Code	Last 4 digits of account number

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Part 3: List Others to Be Notified About a Debt That You Already Listed

11/art	1 Financia		s to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor?
Name	1 IPIGNICIO	es wings	On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Stree	1		☐ Part 2: Creditors with Nonpriority Unsecured Clair
			Last 4 digits of account number
City Stare A subspice to state stores, as presente we reserve to	State or over a selection of the select	ZIP Code	的种种分类性原则,使用于一种,不是一种,是一种,是一种,是一种,是一种,是一种,是一种,是一种,是一种,是一种,
Vame		771.00	On which entry in Part 1 or Part 2 did you list the original creditor?
Citi B	ank		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Stree			Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digits of account number
ity sossossissississississississississississ		ZIP Code	
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Stree	i		Part 2: Creditors with Nonpriority Unsecured Claims
NA.	State		Last 4 digits of account number
	n pour papas seus prosportable de l'apparent	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
lame			· · · · ·
lumber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
		MAAAAA AAAAA	Claims Part 2: Creditors with Nonpriority Unsecured
ity	State	ZIP Code	Last 4 digits of account number
lame	THE SERVICE CONT. AND THE SERVICE CONTRACT IS NOT THE SERVICE CONTRACT IN SERVICE CONTRACT IN SERVICE CONTRACT.	5 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	On which entry in Part 1 or Part 2 did you list the original creditor?
ame			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street		···.	☐ Part 2: Creditors with Nonpriority Unsecured
		Additionally the depth of the second	Claims
ity	State State	ZIP Code	Last 4 digits of account number
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
u			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Nonpriority Unsecured Claims
ty	State этом ситем политической	ZIP Code	Last 4 digits of account number
ame	7.	the state of the s	On which entry in Part 1 or Part 2 did you list the original creditor?
umber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
omoei Street			Part 2: Creditors with Nonpriority Unsecured Claims
itv	State	ZIP Code	Last 4 digits of account number

Det	Document Page 40 of Control (Car)		esc Main
Pa	rt 4: Answer These Questions for Administrative and Statistical Records	S	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this f	form to the court with your othe	er schedules.
7.	What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by ar family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose. Your debts are not primarily consumer debts. You have nothing to report on this parthis form to the court with your other schedules.	oses, 28 U.S.C. § 159.	
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ncome from Official	\$ 8, 1966
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following:	Total claim	
	9a. Domestic support obligations (Copy line 6a.)	\$	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	
	9d. Student loans. (Copy line 6f.)	\$	
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

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E#I	in this is	formation to identify	vour case!		ge .1 0. 00	
		Vilorio	/ , L;	00000		
Deb		Pirst Name	Middle Name	Last Name		
	tor 2 use If filing)	First Name	Middle Name	Last Name		
Unit	ed States	Bankruptcy Court for the:	Northern District of Illin	ois		
	e number nown)	the file like the same of the				Check if this is an amended filing
Off	icial f	Form 106G				
Sc	hed	ule G: Exec	utory Conf	tracts and	Unexpired Leases	12/15
1.	mation. I ional par Do you I No. C Yes. List sepa	f more space is neede ges, write your name a nave any executory co theck this box and file the Fill in all of the information trately each person or	ed, copy the additions and case number (if is necessary or unexpired his form with the court ion below even if the company with whom	al page, fill it out, nu known). leases? with your other sched ontracts or leases are	gether, both are equally responsible for sup mber the entries, and attach it to this page. I ules. You have nothing else to report on this for listed on Schedule A/B: Property (Official Formact or lease. Then state what each contract of in the instruction booklet for more examples or	on the top of any rm. n 106A/B). or lease is for (for
74.33 31.33	unexpired	d leases. or company with whon	n you have the contr	act or lease	State what the contract or lease is f	
2.1						
1	Name					
:	Number	Street				
1	City		State ZIP Code			
2.2	n teorianens emilitare	and the state of the second state of the secon	R FFEN HE FEZ FRIPE E ZYNEE PEZ FERNALLE ZE HENRELA FEZ FRIPE IN 2007-BEZ E FRESK E FRESK FRESK FRESK FRESK FR	ፍላብ የአራምላቸው የሚያቸጠሉ የተቀላቀቸው መስፈ ተጠቀጠይታን የመያረተ ትምር መስ ፍላወ	化甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基	ukking terbenang kalaun mengabbah terbenah mengah mengan mengan kelaban terbenah terbenah terbenah terbenah te
filled.	Name					
	Number	Street				
2.3	City	erig et selven and a selven en selven en samman en se de de en en selven en a sed er en en se ses en en en en	State ZIP Code	ita parituen esente et eta un esente ete eta en en esente ete eta eta eta eta eta eta eta eta e	rm-overtronitary to the control for the public properties and the control of the	le far et fall de deut men ende e van deut de sterr far fande en de en endere de van de deutsche de de de de d
	Name					
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2.4	Name					
1	Number	Street				
, containing and	City	enter de central de Specificação do Producto (Producto por Sala de California de America de Producto (Producto	State ZIP Code			
2.5						
	Name					
	Number	Street	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Cit.,		tata 710 Cada	**************************************		

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Additional Page to List More Codebtors

: : :	Column 1	Your codebtor	Column 2: The creditor to whom you owe the debt
3	Sexage		Check all schedules that apply:
	Name		☐ Schedule D, line
			☐ Schedule E/F, line
	Number	Street	☐ Schedule G, line
	City	State ZIP Code	
3	Name		☐ Schedule D, line
			☐ Schedule E/F, line
	Number	Street	☐ Schedule G, line
	City	State ZIP Code	
3	Name		Schedule D, line
			☐ Schedule E/F, line
	Number	Street	Schedule G, line
 1	City	State ZIP Code	
3	N		☐ Schedule D, line
	Name		☐ Schedule E/F, line
	Number	Street	Schedule G, line
	City	State ZIP Code	
3			
	Name		Schedule D, line
			Schedule E/F, line
	Number	Street	Schedule G, line
	City	State ZIP Code	
	Name		☐ Schedule D, line
			☐ Schedule E/F, line
	Number	Street	Schedule G, line
	City	State ZIP Code	
-	Name		Schedule D, line
	140/110		Schedule E/F, line
	Number	Street	Schedule G, line
	City	State ZJP Code	
	Name		Schedule D, line
			Schedule E/F, line
	Number	Street	☐ Schedule G, line
resolver.	City	State State Size Code	

Case 16-33114 Doc 1 Filed 10/18/16 Entered 10/18/16 09:09:38 Desc Main Page 43 of 65 Document Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Case number (If known) Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out. and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) ☐ No 1 Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? ☑ No Yes. In which community state or territory did you live? Fill in the name and current address of that person. 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line ☐ Schedule E/F, line 🗓 Schedule G, line _ ZIP Code 3.2 Schedule D. line ☐ Schedule E/F, line ____ ☐ Schedule G, line ____

Name
| Schedule D, line | Schedule D, line | Schedule E/F, line | Schedule E/F, line | Schedule G, line | Schedule G, line | Schedule D, line | Schedule D, line | Schedule D, line | Schedule D, line | Schedule E/F, line | Schedule E/F, line | Schedule G, line

3.3

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Case number (if known)

Additional Page to List More Codebtors

		About all apparents to a second
****		Check all schedules that apply:
Name		Schedule D, line
		☐ Schedule E/F, line
Number	Street	Schedule G, line
City	State	ZIP Code
Vame		Schedule D, line
4GITE		☐ Schedule E/F, line
Number	Street	□ Schedule G, line
City	State	ZIP Code
		Schedule D, line
Name		Schedule E/F, line
Vumber	Street	Schedule G, line
-unaci	oucc.	Gordand O, Ille
ity	State	ZIP Code
lame		Schedule D, line
iai iac		☐ Schedule E/F, line
lumber	Street	□ Schedule G, line
ity	State	ZIP Code
		Schedule D, line
lame		☐ Schedule E/F, line
lumber	Street	Schedule G, line
ity	State	ZIP Code

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umber	Street	Schedule E/F, line Schedule G, line
ity	State	ZIP Code
ame		Schedule D, line
		☐ Schedule E/F, line
umber	Street	Schedule G, line
ity	State	ZIP Code
		Schedule D, line
ame		☐ Schedule E/F, line
umber	Street	Schedule G, line

						*	* ^
Case 16-33114	Doc 1 Filed 1 Docu			ed 10/18 5 of 65	/16 09:09:	38 Desc	: Main
Fill in this information to identify		mem ra	JE 4	.5 01 05			
Debtor 1 Volando	a Gut	OCCOI	<u></u>				
Debtor 2	Middle Name	Last Name		<u></u>			
(Spouse, if filing) First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:	Northern District of Illinois						
Case number (If known)				I	theck if this is: An amende		
<u> L</u>					A suppleme	nt showing p	postpetition chapter 13
Official Form 106I						of the followin	ng date:
Schedule I: You	ır İncome				MM / DD / YY	YY	12/15
Be as complete and accurate as p		. 1					
Part 1: Describe Employm						j. Allower eve	rry quesuon.
Fill in your employment information.		Debtor 1				ebtor 2 or no	n-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Mot emplo	yed		Hallow A, Will (Princ) for all he had no construction and an indicated	Employed Not employ	end
Include part-time, seasonal, or self-employed work.		,	•			· · · · · · · · · · · · · · · · · ·	~~
Occupation may include student or homemaker, if it applies.	Occupation	***************************************	***************************************		**************************************		
	Employer's name	***				· · · · · · · · · · · · · · · · · · ·	
	Employer's address				411		
		Number Street			Nun	ber Street	
•		O't-					
	How long employed then	City re?	Sta	ite ZIP Code	City		State ZIP Code
			-				
Part 2: Give Details About	Monthly Income						
Estimate monthly income as of spouse unless you are separated.							-
If you or your non-filing spouse ha below. If you need more space, at	ive more than one employe tach a separate sheet to thi	r, combine the info is form.	ormati	ion for all em	oloyers for that p	erson on the	lines
				For Deb	化氯化甲基甲基甲基甲甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基	Debtor 2 or -filing spous	e e
List monthly gross wages, sala deductions). If not paid monthly,	iry, and commissions (bef calculate what the monthly	fore all payroll wage would be.	2.	\$	\$	The state of the s	
3. Estimate and list monthly over	time pay.		3.	+ \$	+ \$		-
							,

4. Calculate gross income. Add line 2 + line 3.

Debtor 1 Volanda Gutrerie Pa		6 of 65 Case number (# known	n]	
		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	🗲 4.	\$	\$	
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	£.,	•	¢	
5b. Mandatory contributions for retirement plans	5a. 5b.	\$	a	
5c. Voluntary contributions for retirement plans	5c.	·	ā	
5d. Required repayments of retirement fund loans	5d.	Ф	\$ \$	
5e. Insurance	5a. 5e.	Ψ	Φ <u> </u>	
5f. Domestic support obligations	5f.	\$	Ψ	
5g. Union dues		\$	\$	
5h. Other deductions. Specify:	5g.	<u> </u>	Ψ	
	5h.	+ \$	+ \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5	5h. 6.	\$	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$	
B. List all other income regularly received:				
 Net income from rental property and from operating a business, profession, or farm 				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$	
8b. Interest and dividends	8b.	\$	\$	
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	dent		T	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8e.	<u>\$733 </u>	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		s_178 _	\$	
8g. Pension or retirement income	8g.	\$	\$	
8h. Other monthly income. Specify:	_ ₁ 8h.	+\$	+ \$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	1 0.	\$	\$	
2. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ 931 +	\$:	= \$
1. State all other regular contributions to the expenses that you list in School	edule i		LI	
Include contributions from an unmarried partner, members of your household, friends or relatives.			nates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are	e not av	ailable to pay expense	s listed in Schedule J.	
Specify:			11.4	- \$
2. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain				s 0136.00
			12.	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this No. Yes. Explain:	form?			-

Case 16-33114	Doc 1 Filed 10/18/16 Document	Entered 10/18/16 Page 47 of 65	09:09:	38 Desc	Main
Fill in this information to identify	your case:				
Debtor 1 Yo landa	Catterrez				
First Name	Middle Name Last Name	Check if	f this is:		
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	An a	mended	filing	
United States Bankruptcy Court for the:	Northern District of Illinois			t showing post of the following	petition chapter 13 g date:
(If known)		MM /	DD / YYY	Y	
Official Form 106J					
Schedule J: Yo	ur Expenses				12/15
Be as complete and accurate as p information. If more space is need (if known). Answer every question	ossible. If two married people are fil ed, attach another sheet to this form	ing together, both are equall n. On the top of any addition	y respons al pages,	sible for supply write your nam	ing correct e and case number
Part 1: Describe Your Hou	ısehold				
1. Is this a joint case?					
No. Go to line 2. Yes. Does Debtor 2 live in a s	separate household?				
☐ No ☐ Yes. Debtor 2 must fil	e Official Form 106J-2, Expenses for S	Separate Household of Debtor :	2.		
2. Do you have dependents?	☐ No		analis (1991), antica ha a Parkin anni anni anni a	the trades of the state of the	en kunstan om kan sykstyllingsborde en en der kunstan yptingen syksykstille frederick an en en en en e
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	NASSANSIANIA	Dependent's age	Does dependent live with you?
Do not state the dependents' names.		Daughter	···············	18	☐ No ☐ Yes
			 ,	***************************************	☐ No ☐ Yes
					□ No □ Yes
		***************************************			☐ No ☐ Yes
					☐ No
					☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	No Yes	ten menten era menten i sa sistema era pengang mejembengan kanan menganyangkan kanan kanan kanan kelabah berak		no be common roas before the company	
Part 2: Estimate Your Ongoi	ng Monthly Expenses				
Estimate your expenses as of your expenses as of a date after the ban applicable date.	bankruptcy filing date unless you a kruptcy is filed. If this is a suppleme	re using this form as a supplental <i>Schedule J</i> , check the b	ement in ox at the	a Chapter 13 ca top of the form	se to report and fill in the
• •	-cash government assistance if you	know the value of			A - A
such assistance and have included	it on Schedule I: Your Income (Office	ial Form 106i.)		Your expen	ses
 The rental or home ownership examples any rent for the ground or lot. 	xpenses for your residence. Include	first mortgage payments and	4.	\$ 92	
If not included in line 4:					
4a. Real estate taxes			4a.	\$	
4b. Property, homeowner's, or re			4b.	\$	
4c. Home maintenance, repair, a	·		4c.	\$	
4d. Homeowner's association or	condominium dues		4d.	\$	

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F	Fill in this information to identify	your case:				
Г	Debtor 1 40 (anda	Coutiocces				
-	First Name	Middle Name Last Name	Check if th	is is:		
	Debtor 2 Spouse, if filing) First Name	Middle Name Last Name	An ame	ended f	filing	
L	Inited States Bankruptcy Court for the:	Northern District of Illinois			showing post of the following	petition chapter 13 g date:
	Case number (If known)		MM / DE) / YYY\	/	
0	fficial Form 106J-2					
***************************************		xpenses for Sepa	rate Household	of I	Debtor :	2 12/15
Us De on nec	e this form for Debtor 2's separa btor 2 have one or more depend ly with respect to expenses for a eded, attach another sheet to the estion.	ate household expenses ONLY IF De dents in common, list the dependent Debtor 2 that are not reported on Sc is form. On the top of any additional	ebtor 1 and Debtor 2 maintain ses on both Schedule J and this the	eparate	households. Answer the queen as possible.	If Debtor 1 and estions on this form If more space is
	Describe Your Hou					
ı	Oo you and Debtor 1 maintain se					
	Yes				the Edvid Charles Transfer Charles Charles and American Charles Charle	
(Do you have dependents? Do not list Debtor 1 but list all	No Wes. Fill out this information for	Dependent's relationship to Debtor 2:		Dependent's age	Does dependent live with you?
r	other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.	each dependent	Basilensia di Las Spilaning Maligore podredo colonis probase en escribo colonis de característico que su se e La colonis de la colonis de		18	No Ves
	Do not state the dependents'		·		West of the second seco	☐ No ☐ Yes
						☐ No ☐ Yes
						☐ No
						Yes
						□ No
e y	o your expenses include expenses of people other than rourself, your dependents, and Debtor 1?	No Pyes				☐ Yes
Par	t 2: Estimate Your Ongoin	na Monthiv Expenses				
-		bankruptcy filing date unless you a	re using this form as a sunnlem	ant in	Chanter 13 c	asa ta ranart
	enses as of a date after the ban		re usuig mis ivini as a supplem	ient in	e Chapter 13 C	ase to report
		-cash government assistance if you			NI NASARIANAN	MARINER CONTRACTOR
		it on Schedule I: Your Income (Offic			Your exper	1ses
	The rental or home ownership eany rent for the ground or lot.	xpenses for your residence. Include	first mortgage payments and	4.	<u>\$</u>	2
	If not included in line 4:					
	4a. Real estate taxes			4a.	\$	
	4b. Property, homeowner's, or re			4b.	\$	ANTONIA DE LA CONTRACTOR DE LA CONTRACTO
	4c. Home maintenance, repair, a	· · ·		4c.	\$	
	4d. Homeowner's association or	condominium dues		4d.	\$	

Case number (# known)__

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	, 240.00
	6b. Water, sewer, garbage collection	6b.	•
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	s 55.00
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$ 198
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$ 40.00
10.	Personal care products and services	10.	\$ 20.00
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare.		s 80
	Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other, Specify:	17c.	\$
	17d. Other, Specify:	17d.	\$
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
٥		, 0.	\$
	Other payments you make to support others who do not live with you. Specify:	19.	\$
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income		<u> </u>
	20a. Mortgages on other property	 20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20b. 20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	200. 20e.	\$
		- 44.	*

Debtor 1	Document Page 50 of 6 First Name Middle Name Last Name Co.	35 ase number (# known)	
21. Othe r.	Specify:	21.	+\$
22. Calc ula	ate your monthly expenses.		
22a. Ad	dd lines 4 through 21.	22a .	s 725
22b. Co	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b .	\$
22c. Ad	dd line 22a and 22b. The result is your monthly expenses.	22c.	\$ 725
22 Calculat	te your monthly net income.		
	opy line 12 (your combined monthly income) from Schedule I.	23a.	s 931
	opy your monthly expenses from line 22c above.	23b.	-s_725
	ubtract your monthly expenses from your monthly income. he result is your monthly net income.	23c.	\$ 706
For exar	expect an increase or decrease in your expenses within the year after you file mple, do you expect to finish paying for your car loan within the year or do you expect to payment to increase or decrease because of a modification to the terms of your managery.	at your ortgage?	
☐ Yes.	Explain here:		
			:

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Fill in this information to identify your case:		
Debtor 1 Hist Name Middle Name	otiener	
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name	
United States Bankruptcy Court for the: Northern District of		
Case number	THIRDS	
(If known)		Check if this is an amended filing
Official Form 106Dec		
Declaration About an	Individual Debtor's Schedules	12/15
If two married people are filing together, both are	equally responsible for supplying correct information.	
Sign Below Did you pay or agree to pay someone who is N No Yes. Name of person	NOT an attorney to help you fill out bankruptcy forms?	
	Attach Bankruptcy Petition Preparer's Notice, Det Signature (Official Form 119).	parauori, ang
signature of Debtor 1	read the summary and schedules filed with this declaration and	
Date 10 06 2016	Date	· ·

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Fill in this information to identify your case:			
Debtor 1 Yolanda Oct	tierrez		
kirst Name Middle Name Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District of Case number	INITIONS		_
(If known)			Check if this is an amended filing
Official Form 107			
Statement of Financial Affair	rs for Indiv	iduals Filing for Bankruptcy	/ 04/16
Be as complete and accurate as possible. If two marr information. If more space is needed, attach a separa number (if known). Answer every question.	led people are filin	g together, both are equally responsible for supplyi	ng correct
Part 1: Give Details About Your Marital Sta	tus and Where Y	ou Lived Before	
What is your current marital status?			
Married			
☐ Not married			
2. During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3 y Debtor 1:	-		Dates Debtor 2 lived there
		Same as Debtor 1	Same as Debtor 1
N	From	No. 1	From
Number Street	То	Number Street	То
	-		
City State ZIP Code		City State ZIP Code	
		☐ Same as Debtor 1	Same as Debtor 1
Number Street	From	Number Street	From
Name Steet	To	Number Sueet	То
	•		
City State ZIP Code	-	City State ZIP Code	
3. Within the last 8 years, did you ever live with a sp states and territories include Arizona, California, Idal	oouse or legal equi ho, Louisiana, Nevad	valent in a community property state or territory? (da, New Mexico, Puerto Rico, Texas, Washington, and	Community property Wisconsin.)
Yes. Make sure you fill out Schedule H: Your Co	debtors (Official For	m 106H).	
Part 2: Explain the Sources of Your Income			

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	Did you have any income from employment Fill in the total amount of income you received If you are filing a joint case and you have income No	d from all jobs and all busi	nesses, including part-tir	ne activities.	ndar years?
	Yes. Fill in the details.	Section No. 2009			
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
			one and the second of the seco	- Opolosing & Dataset	
	For last calendar year:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
	(January 1 to December 31,)	Operating a business	***************************************	Operating a business	
	For the calendar year before that:	☐ Wages, commissions, bonuses, tips	_	Wages, commissions, bonuses, tips	
	(January 1 to December 31,)	Operating a business	\$	Operating a business	\$
	List each source and the gross income from e No Yes. Fill in the details.	Debtor 1	not module modifie that	Debtor 2	
		Sources of income			
		Parada katawa	Gross income from	Sources of income	Gross income from
		Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until	Describe below.	each source (before deductions and	्र किन के निर्माण किरोगिक स्थिति (३८०५) ५	each source (before deductions and
	From January 1 of current year until the date you filed for bankruptcy:	Describe below.	each source (before deductions and	्र किन के निर्माण किरोगिक स्थिति (३८०५) ५	each source (before deductions and
		Describe below.	each source (before deductions and	्र किन के निर्माण किरोगिक स्थिति (३८०५) ५	each source (before deductions and
	the date you filed for bankruptcy:		each source (before deductions and exclusions) \$ \$	Describe below.	each source (before deductions and exclusions) \$
	the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,		each source (before deductions and exclusions) \$ \$	Describe below.	each source (before deductions and exclusions) \$
	For last calendar year: (January 1 to December 31,)		each source (before deductions and exclusions) \$	Describe below.	each source (before deductions and exclusions) \$
	For last calendar year: (January 1 to December 31,)		each source (before deductions and exclusions) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Describe below.	each source (before deductions and exclusions) \$
	For last calendar year: (January 1 to December 31,)		each source (before deductions and exclusions) \$	Describe below.	each source (before deductions and exclusions) \$

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Debtor 1

Cube to cotta	
1 , ,	Document
Yolanda	(sutierrez
First Name Middle Name	Last Name

Case number (if known)

Part 3:

List Certain Payments You Made Before You Filed for Bankruptcy

O N	o. Neit	ther Debtor 1 n	or Debtor 2	has primarily	consumer deb	ts. Consumer debi	ts are defined in 11 U.S.	C. § 101(8) as	
	"inc	urred by an indi	vidual primar	ily for a persor	nal, family, or ho	usehold purpose."			
	Duri	ing the 90 days	before you fi	ed for bankrup	ptcy, did you pay	y any creditor a tota	al of \$6,425* or more?		
		No. Go to line 7							
		Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.							
	* Su	bject to adjustm	ent on 4/01/	19 and every 3	3 years after tha	t for cases filed on	or after the date of adjus	stment.	
J Y	es. Deb	tor 1 or Debtor	2 or both h	ave primarily	consumer deb	ts.			
	Duri	ing the 90 days	before you fil	ed for bankrup	otcy, did you pay	any creditor a tota	al of \$600 or more?		
		No. Go to line 7.							
	٠ ي	creditor. Do	o not include	payments for	domestic suppo	600 or more and the rt obligations, such for this bankruptcy Total amount paid		erakeranga, nyang erakerakan nakeran eraka	
					payment	iotal amount paid	Adiousi you sun	owe was uns payment to	
						\$	\$ <u></u>		
		Creditor's Name						☐ Car	
		Number Street		***************************************				Credit card	
								Loan repayment	
			- 					☐ Suppliers or vend	
		City	State	ZIP Code				☐ Other	
						errore e en	. Con a communication and an experience of the contraction of the cont		
						\$	\$		
		Creditor's Name						☐ Car	
		Number Street	·					Credit card	
								Loan repayment	
					• • • • • • • • • • • • • • • • • • • •			Suppliers or vendo	
		City	State	ZIP Code				☐ Other	
		•							
		.,							
					<u> </u>	\$	\$		
		Creditor's Name						☐ Car	
		Creditor's Name							
		Creditor's Name Number Street						Credit card	
					***************************************			Loan repayment	

Entered 10/18/16 09:09:38 Doc 1 Filed 10/18/16 Desc Main Page 55 of 65 **Qocument** Debtor 1 Case number (if know 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. ☐ No ☐ Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid Insider's Name Number Street ZIP Code Insider's Name Number Street City State ZIP Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited Include payments on debts guaranteed or cosigned by an insider. ☐ No Yes. List all payments that benefited an insider. Total amount Dates of Amount you still Reason for this payment paid Include creditor's name Insider's Name Number Street State ZIP Code

Insider's Name

Street

State

ZIP Code

Number

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Case number (if known)_

such matters, including personal injury ontract disputes.		suit, court action, or administration orces, collection suits, paternity ac		dy modifica
s. Fill in the details.				
	Nature of the case	Court or agency		s of the ca
ase title		Court Name	Q P(ending
:				n appeal
		Number Street	a co	oncluded
ase number				
		City State ZI	P Code	
		:		
ase title		Court Name	D P6	ending
		•	☐ Or	n appeal
		Number Street	D c	oncluded
ase number				
		City State ZI	P Code	
. Go to line 11. s. Fill in the information below.	Describe the property			
	The state of the s	<u> </u>		
s. Fill in the information below.	Describe the property	-		
s. Fill in the information below.	The state of the s	-		
s. Fill in the information below. Creditor's Name	Describe the property Explain what happened	-		
s. Fill in the information below. Creditor's Name	Describe the property	ossessed.		
s. Fill in the information below. Creditor's Name	Explain what happened	ossessed.		
s. Fill in the information below. Creditor's Name	Explain what happened Property was rep Property was ford Property was gar	ossessed.		
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S. Fill in the information below. Creditor's Name Number Street	Explain what happened Property was rep Property was ford Property was gar Property was atta	ossessed. eclosed. mished. ached, seized, or levied.	Date Value of S	the prope
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No		
Yes. Fill in the details.		
		en de la companya de
	Describe the action the creditor took	Date action Amount was taken
Creditor's Name		The A was taken why have a server the server of the server
Number Street		\$
		:
		:
City State ZIP Code	Last 4 digits of account number: XXXX	ur.
thin 1 year before you filed for bankru	optcy, was any of your property in the possession of an assi	issaa far tha hanafit af
editors, a court-appointed receiver, a	custodian, or another official?	ignee for the benefit of
No		
Yes		
Augustation		
5: List Certain Gifts and Contril	butions	
	uptcy, did you give any gifts with a total value of more than	\$600 per person?
No		
Yes. Fill in the details for each gift.		
		Dates you gave Value the gifts
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600		
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street		
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Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you	Describe the gifts	\$\$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts	the gifts \$\$ \$ Dates you gave Value
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Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	the gifts \$\$ \$ Dates you gave Value

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Case number (if know

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ☑ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Number Street City State ZIP Code Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? ☐ No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. D No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was Person Who Was Paid made Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You

to women's the control of the contro

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Debtor 1

1	Document
Yolanda	Gertierrez

Case number (# known)___

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	a tanakatan disantah kerasa 1886 berta berta kita kitanda di antah kita diban kita 1996 bili 1996 berta. T		_
Number Street			\$
			\$
City State ZIP Code			
Email or website address		i -	
Person Who Made the Payment, if Not You			
Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that you ho	tcy, did you or anyone else acting on your behalf pay or toors or to make payments to your creditors? ou listed on line 16.	ransfer any property t	o anyone who
Yes. Fill in the details.			
	Description and value of any property transferred	Date payment or transfer was	Amount of paymen
Person Who Was Paid		imade distribution	
Number Street			\$
		-	\$
City State ZIP Code			
Annual and the African and the American and the American and the African and African a	otcy, did you sell, trade, or otherwise transfer any proper business or financial affairs?		•
	Taran Care ara denan basis da melah dibas esti melah dibas	ty or payments received	
Include both outright transfers and transfers in Do not include gifts and transfers that you have No	ve already listed on this statement. Describe any property Describe any property	ty or payments received	Date transfer
Include both outright transfers and transfers in Do not include gifts and transfers that you have No Yes. Fill in the details.	ve already listed on this statement. Describe any property Describe any property	ty or payments received	Date transfer
Include both outright transfers and transfers in Do not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer	ve already listed on this statement. Describe any property Describe any property	ty or payments received	Date transfer
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Include both outright transfers and transfers in Do not include gifts and transfers that you have No No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	Description and value of property transferred Describe any property are not property or debts paid in exc	ty or payments received	Date transfer
Include both outright transfers and transfers in Do not include gifts and transfers that you have to not include gifts and transfers that you have to not include gifts and transfers that you have the notation of the notati	Description and value of property transferred Describe any property are not property or debts paid in exc	ty or payments received	Date transfer
Include both outright transfers and transfers in Do not include gifts and transfers that you have a No No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	Description and value of property transferred Describe any property are not property or debts paid in exc	ty or payments received	Date transfer

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Case number (if known)__

	.				
	No Yes. Fill in the details.				
	Yes. Fill In the details.	FRANKERSKANNESSKARATIONING	A NATA NAVA NAVARA NA NAVARA	ura i e care e cora de los estas da los esculas.	water at the territory
		Description and value of the prope	the control of the co		Date transfer was made
				Vibrito (di agande Sibrito).	was made
	Name of trust				
					:
				Name (Arthorn and Arthorn Arth	
art 8	List Certain Financial Account	s, instruments, Safe Deposit	Boxes, and Storage	Units	wa m 17 (日) 日本 からと 日本 (日本 (日本 (日本 (日本 (日本 (日本 (日本 (日本 (日本
	hin 1 year before you filed for bankrupt			· ·	honefit
	sed, sold, moved, or transferred?	wy, were any mancial accounts t	on mad dimenta nelo si yi	our name, or for your	penent,
Inc	lude checking, savings, money market,			es in banks, credit un	ions,
1	kerage houses, pension funds, cooper	atives, associations, and other fi	nancial institutions.		
u	Yes. Fill in the details.	ganggaran an mgalay ba tag			1907-1908-1908
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance before closing or transfer
				or transferred	
	Name of Financial Institution		_		
		XXXX	Checking		\$
	Number Street		Savings		
			Money market		
	City State ZIP Code		☐ Brokerage		
	City State 21 Code	a transmission on the contract of the contract	Other		
		1000¢	Π		_
	Name of Financial Institution	XXXX	Checking		\$
			☐ Savings		
	Number Street		Money market		
			☐ Brokerage		
			F">		
	City State 71P Code		Other		
	City State ZIP Code				
	you now have, or did you have within 1	year before you filed for bankrup		ox or other depository	y for
	you now have, or did you have within 1 urities, cash, or other valuables?	year before you filed for bankrup		ox or other depository	/ for
sec	you now have, or did you have within 1 urities, cash, or other valuables?	year before you filed for bankrup		ox or other depository	y for
sec	you now have, or did you have within 1 urities, cash, or other valuables? No	Who else had access to it?		de artes tota ediployed expects	Do you still
sec	you now have, or did you have within 1 urities, cash, or other valuables? No	era coma e coma e caractera e e experiencia.	otcy, any safe deposit bo	de artes tota ediployed expects	Do you still have it?
sec	you now have, or did you have within 1 urities, cash, or other valuables? No	Who else had access to it?	otcy, any safe deposit bo	de artes tota ediployed expects	Do you still have it?
sec	you now have, or did you have within 1 urities, cash, or other valuables? No	Who else had access to it?	otcy, any safe deposit bo	de artes tota ediployed expects	Do you still have it?
sec	you now have, or did you have within 1 urities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution	Who else had access to it?	otcy, any safe deposit bo	de artes tota ediployed expects	Do you still have it?
sec	you now have, or did you have within 1 urities, cash, or other valuables? No Yes. Fill in the details.	Who else had access to it?	otcy, any safe deposit bo	de artes tota ediployed expects	Do you still have it?

🔲 Yes. Fill in	n the details.			
		Who else has or had access to it?	Describe the contents	Do you st have it?
B-79-70-70-00-00-00-00-00-00-00-00-00-00-00-			·	□ No
Name of S	torage Facility	Name		Yes
Number	Street	Number Street	_	
		CityState ZIP Code		
City	State ZIP Code			
t 9:	entify Property You Hol	id or Control for Someone Else		
		at someone else owns? Include any propert	y you borrowed from, are storing for,	
	st for someone.		•	
	n the details.			
		Where is the property?	Describe the property	Value
Owner's N	2ma			
Owner's N	ame			\$
Number	Street	Number Street		
POHOST				
City	State ZIP Code	City State ZIP Code		
City		-		
City	ve Details About Enviro	nmental Information		
City 11 10: Giv	of Part 10, the following do	enmental Information efinitions apply:	ing pollution contamination releases of	
City 1 10: Giv the purpose Environment nazardous or	of Part 10, the following de law means any federal, so toxic substances, wastes	enmental Information efinitions apply: state, or local statute or regulation concerni	water, groundwater, or other medium,	
City 1 10: Giv the purpose Environment nazardous or ncluding sta	of Part 10, the following de al law means any federal, so toxic substances, wastes tutes or regulations contro	efinitions apply: state, or local statute or regulation concerni , or material into the air, land, soil, surface of	water, groundwater, or other medium, tes, or material.	: : :
City 1 10: Gin the purpose Environment nazardous or ncluding sta	of Part 10, the following de law means any federal, so toxic substances, wastes tutes or regulations controlly location, facility, or project	enmental Information efinitions apply: state, or local statute or regulation concerni	water, groundwater, or other medium, tes, or material.	
City 2 10: Giv the purpose Environment lazardous of including sta title means a titlize it or us	of Part 10, the following deal law means any federal, so toxic substances, wastes tutes or regulations controlly location, facility, or project to own, operate, or utilizaterial means anything an	efinitions apply: state, or local statute or regulation concerni , or material into the air, land, soil, surface of these substances, was perty as defined under any environmental laize it, including disposal sites.	water, groundwater, or other medium, tes, or material. aw, whether you now own, operate, or	
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the purpose Environment nazardous or neluding statilize it or usual azardous musubstance, hort all notice	of Part 10, the following de law means any federal, so toxic substances, wastes tutes or regulations controlly location, facility, or project to own, operate, or utility atterial means anything an azardous material, pollutaries, releases, and proceeding	efinitions apply: state, or local statute or regulation concerni , or material into the air, land, soil, surface of the second statute of these substances, was perty as defined under any environmental laize it, including disposal sites. environmental law defines as a hazardous of the contaminant, or similar term.	water, groundwater, or other medium, tes, or material. aw, whether you now own, operate, or waste, hazardous substance, toxic n they occurred.	
city the purpose Environment nazardous or neluding sta Site means a ntilize it or us fazardous m substance, h ort all notice as any gove	of Part 10, the following de law means any federal, so toxic substances, wastes tutes or regulations controlly location, facility, or project to own, operate, or utility atterial means anything an azardous material, pollutaries, releases, and proceeding	efinitions apply: state, or local statute or regulation concerni, or material into the air, land, soil, surface olling the cleanup of these substances, was perty as defined under any environmental laize it, including disposal sites. environmental law defines as a hazardous of, contaminant, or similar term.	water, groundwater, or other medium, tes, or material. aw, whether you now own, operate, or waste, hazardous substance, toxic n they occurred.	
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Case number (if known)

No			
Yes. Fill in the details.			
	Governmental unit	ntal law, if you know it	Date of notic
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code	<u> </u>		
			e ee ye.
<i>.</i>	dministrative proceeding under any environme	ental law? Include settlements and	orders.
No			
Yes. Fill in the details.	CONTRACTOR AND CONTRACTOR AND CASES	NA MARKATAN NA SARAN KANTAN NA MARKATAN NA SARAN NA SARA	gruga makaa ah iri
	Court or agency Nature	e of the case	Status of the
Case title	·		* - * * *
	Court Name		Pending
			On appe
	Number Street		☐ Conclud
Case number	<u> </u>		
Case number			
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Case number (if known)_

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Business Name		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code		From To
28. Within 2 years before you filed for bankru institutions, creditors, or other parties.	ptcy, did you give a financial statement to anyone a	about your business? Include all financial
☑ No		
Yes. Fill in the details below.	Date issued	
Name	MM / DD / YYYY	
Number Street		
City State ZIP Code Part 12: Sign Below		
answers are true and correct. I understan	nt of Financial Affairs and any attachments, and I dend that making a false statement, concealing proper result in fines up to \$250,000, or imprisonment for	rty, or obtaining money or property by fraud
Significant Polyton 1	Signature of Debtor 2	
Signature of Debtor 1	O Signature of Deotor 2	
Date 10-6-20/6	Date	
Did you attach additional pages to Your S	Statement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
M No □ Yes		
Did you pay or agree to pay someone who	o is not an attorney to help you fill out bankruptcy	forms?
Yes. Name of person	Atta	ch the Bankruptcy Petition Preparer's Notice, laration, and Signature (Official Form 119).

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If you are an individual f	ling under chapter 7, vou	must fill out this form	n if:		
Official Form 1		for Individ	luals Filing Unde	er Chapter 7	12/15
Debtor 1 Debtor 2 (Spouse, if filing) United States Bankruptcy Court Case number (If known)	Middle Name Middle Name	Last Name Last Name Illinois			c if this is an ded filing
		Document	Page 64 of 65		

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

information below.	Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the			
Identify the creditor and the property that is collateral	leral What do you intend to do with the property that Did you claim the property			
Creditor's	☐ Surrender the property.	☐ No		
name:	Retain the property and redeem it.	☐ Yes		
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.			
securing debt.	Retain the property and [explain]:			
Creditor's	☐ Surrender the property.	□ No		
name:	Retain the property and redeem it.	Yes		
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.			
securing debt.	Retain the property and [explain]:	<u>-</u>		
Creditor's	☐ Surrender the property.	No		
name:	Retain the property and redeem it.	Yes		
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.			
securing debt.	Retain the property and [explain]:			
Creditor's	☐ Surrender the property.			
name:	Retain the property and redeem it.	Yes		
Description of property	Retain the property and enter into a Reaffirmation Agreement.			
securing debt:	Retain the property and [explain]:	_		

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1 1 0	(* A	Document	Page 65 of 65	
blandaG	otill	WZ	Case number (if known)	

I Unexpired Leases (Official Form 106G), Il in effect; the lease period has not yet 11 U.S.C. § 365(p)(2).
Will the lease be assumed?
□ No
Yes
□ No
Yes
vn. + 4 - 1 - 1-457
□ No
Yes
□ No
Yes
□ No
Yes
No.
Yes
□ No □ Yes
LI Yes

Signature of Debtor 1

Date 10 18 2016

MM / DD / YYYY

Date MM / DD / YYYY